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NUTRITION COMMITTEE NEWS

For exchange of information on nutrition education and school lunch activities.

U. S. DEPARTMENT OF AGRICULTURE, Washington, D. C. March-April 1955

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STATE AND LOCAL NEWS ROUNDUP

Active projects, recent accomplishments, and ideas just developing in nutrition committee programs around the country are the theme of this issue of NCN. Taken from current reports, minutes, conference programs, and letters from State and local committees, these news items are grouped to show how they relate to the 10-point nutrition program presented for consideration in the March-April 1954 issue of NCN.

This issue gives a second followup of the program, which is a synthesis of ideas on needs for concerted attention voiced by speakers and participants at the 1952 National Nutrition Institute. The first followup appeared as the "Ten Point Program in Action" in the May-June 1954 issue.

What Are Nutrition Committees Doing To Further Research?

Although nutrition committees sometimes pursue research activities, no report of such activity has been received recently.

Since the emphasis of nutrition committee programs is on extension of nutrition information, members are in good position to see gaps in knowledge that, if filled by research, would hasten improvement of the diets and health of people. The nutrition committee meeting lends itself to testing these ideas on needs and determining which are urgent and appropriate for concerted promotion. In this way workers who represent research agencies on nutrition committees undoubtedly get support and inspiration for their research from fellow committee members.

Review of several compilations shows that research in nutrition and nutrition education has continuing attention from scientists and educators in universities, experiment stations, and other public and private institutions. There seems to be little research, however, on the ways in which people are motivated to convert nutrition knowledge into better food practices, and the effect school lunches have on food practices.

Review included these reports: *Titles of Completed Theses in Home Economics and Related Fields in Colleges and Universities of the United States, 1952-53,* Agricultural Research Service in cooperation with the Office of Education, USDA-PA 236; *A List of Published and Processed Reports on Research in Foods, Human Nutrition, and Home Economics at the Land Grant Institutions, October 1953-54,* Agricultural Research Service, USDA; and *Survey of Food and Nutrition Research in the United States, 1952-53,* Food and Nutrition Board, NRC, under contract with USDA.

Discover better ways to communicate nutrition information and motivate people to use it. (Point 1)

No recent report of nutrition committee activity on this point has been received. However, some committees have had experts in group dynamics and related techniques speak to them, lead them in discussion, and help them plan meetings. Titles of a few talks heard are:

How group methods can help achieve nutrition objectives (N. Y. State); Motivation factors in changing food habits (Ohio); Semantics—communication with eaters (W. Va.).

Develop further knowledge of what to eat for best nutritional health. (Point 2)

Nutrition committees have shown their great interest in findings from this area of work by the number of nutrition scientists they have had speak to them on such topics as:

Review of recent research in nutrition (Ill., Ohio, Mass., Vt.); Today's research in pregnancy (Mass.); Nutrition, growth, and development in young children (Ga., Ohio); Calcium metabolism in children (Mass.); Studies on iron metabolism (N. Y. State); Research in obesity (Mass., N. Y. State); Nutrition and surgery (Ohio); Cholesterol, diet, and cardiovascular conditions (Mass.); Recent trends in gerontology (Mass.); Research projects in South Carolina related to foods (S. C.).

Locate the individuals and the population groups whose diets are in need of improvement. (Point 3)

Although no recent report of nutrition committee activity on this point has been received, it is an area of research which nutrition committees have sometimes pursued. (See May-June 1954 NCN, N.J.; and Nov.-Dec. 1952, W. Va.)

When available, findings from local dietary surveys usually become a basis for nutrition committee programs and often a means of arousing a community to action. (See Mar. 1953 NCN, Maine.)

What Are Nutrition Committees Doing To Inform Other Workers About Nutrition?

Promote the systematic teaching of nutrition in the professional training of teachers, doctors, dentists, nurses, public health and social workers, and home economists, and keep their knowledge up to date through inservice and other programs. (Point 4)

TEACHERS

Several nutrition committees are striving to initiate or improve courses in nutrition and nutrition education in teacher-training colleges in their areas. Details about projects in various States, cities, and specific schools will be reported in the May-June issue of NCN.

NURSES AND SOCIAL WORKERS

The Rhode Island Nutrition Council arranged a series of 4 meetings on nutrition for 98 nurses and social workers. At each meeting a talk by a physician was followed by a food demonstration. Many materials were distributed. Nutrition problems of the infant and preschool child, adolescent, overweight and underweight, and the aging population were covered. A terminal evaluation and requests for a similar course from another group of nurses and from a group of visiting homemakers indicated its acceptance as a valuable educational venture.

NUTRITIONISTS AND HOME ECONOMISTS

News exchange.—Information reported at nutrition committee meetings helps members keep up to date on new knowledge from food and nutrition research and its application. A news exchange is included on agenda of meetings of most committees. Early firsthand reports have been presented by members who have attended such conventions as those of the State School Food Service Association, American Institute of Nutrition, and American Dietetic Association, and the Weight Control Colloquium at Iowa State College.

Through a query the Indiana State Nutrition Council learned that exchange of information was a continuous on-the-job learning and "refreshing" experience for the representatives and was passed on to fellow workers, students, homemakers, and other audiences.

Meetings.—Talks by specialists at meetings help keep many nutrition committee members informed about new developments in nutrition. Chicago, Georgia, Illinois, Maine, Massachusetts, New York, Ohio, and South Carolina have sent in programs or reports from annual meetings, occasional conferences, or institutes held or slated for the year ahead. Titles of some talks they heard will be found under the various points.

The Georgia Nutrition Council at its annual 1-day meeting heard from one out-of-State nutritionist and several State persons. State persons were: The maternal and child health director, the mental health director, a regional nutritionist, and a regional nurse—all of the Georgia Department of Public Health; a pediatrician; a city school supervisor of home economics; the nutrition director of the Georgia Experiment Station; the dean of home economics and head of foods and nutrition, University of Georgia; and the State school lunch director.

The Massachusetts State Nutrition Committee in cooperation with its State Dietetic, Home Economics, and Public Health Associations held a weekend nutrition conference to become better acquainted with the nutrition and food technology research in progress in the State. Members on the staffs of the University of Massachusetts, Massachusetts Institute of Technology, Harvard School of Public Health, U. S. Public Health Service, Massachusetts General Hospital, and Arthur D. Little, Inc., gave reports. The meeting attracted more than 300 professional workers in the State. After evaluating this meeting the Committee has about decided to hold a series of smaller meetings devoted to specific topics and are considering meeting in different sections of the State next year.

The New York State Nutrition Committee usually holds a midwinter 1-day meeting, a spring institute of several days, and at least one short meeting each year to hear about new nutrition findings and nutrition activities in the State. The committee sponsors the annual spring conference in cooperation with a local committee. The 1955 cooperators are the University of Buffalo and the Nutrition Committee of the Council of Social Agencies of Buffalo and Erie County.

The Ohio Nutrition Committee held its second annual conference on human nutrition in 1954 at Ohio State University. Of the 17 speakers, 14 were home State folks—professors in endocrinology and metabolism, surgery, pediatrics, dentistry, psychology, home economics, and dietetics at Ohio State University, and the director and former nutritionist of the State Department of Health.

In Rhode Island a joint meeting for members of the State Nutrition Council, Dietetic Association, and Home Economics Association is a yearly event. Responsibility for planning is rotated among the three.

The South Carolina Nutrition Committee is planning a nutrition conference for professional personnel in 1955.

The Vermont State Nutrition Committee expects to have a spring meeting. A talk on the present state of our nutrition knowledge will be followed by discussion on how to use the information, especially with groups.

Newsletters, minutes.—"Chicago Nutrition Association Reporting," a periodical newsletter, gives "where," "when," and "what" on association and other meetings of professional interest to its members. Sometimes book reviews are included. Texas State Nutrition Council calls its newsletter "What's Cooking" (NCN, June 1952).

The Allegheny County (Pa.) Nutrition Council started issuing a newsletter in 1954 so that its 65 members can "be kept in touch with each other's activities, and also given some idea of what is going on in the world of nutrition research."

Minutes of meetings, which have some features in common with newsletters, are distributed by many committees.

Reference aids.—The Minnesota State Nutrition Council has prepared an annotated bibliography on adult nutrition problems. (See Materials.) Listed in it are books, bulletins, and periodicals covering general nutrition, food values, nutrition in pregnancy and lactation, nutrition of older people, feeding large groups, diet therapy, and techniques for working with groups, as well as sources of nutrition information.

What Are Nutrition Committees Doing To Educate People To Better Food Practices?

Teach the "how" and "why" of food selection for good nutrition from kindergarten through college. (Point 5)

Teachers of grades 1 to 9 in East Hartford, Conn., heard about new facts in nutrition and how to feed the children in the family at an after-school meeting and exhibit of teaching tools arranged by the State Nutrition Council. Participants then formed into smaller demonstration-discussion groups according to age-level interest—grades 1 to 3, 4 to 6, and 7 to 9. After supper a panel of experts answered questions.

The Illinois Nutrition Committee keeps current a list of references on illustrative and other nutrition materials for teachers of grades 1 to 8. Books, pamphlets, posters, periodicals, bibliographies, diet-scoring devices, and names of State agencies issuing supplementary materials are included. The list accompanies A Suggestive Guide for Teaching Nutrition in Illinois Elementary Schools.

Members of the Maine State Nutrition Committee took turns manning a nutrition exhibit set up at the State teachers convention by the school lunch director. The exhibit was intended to give teachers better understanding of the school lunch program and acquaint them with materials for teaching nutrition.

Discover ways of making the school meal more educational. (Point 6)

The New Mexico Nutrition Committee has recently named a subcommittee on the use of the school lunch as an educational device. This subcommittee is in addition to the subcommittee that is now publicizing the new special school milk program.

Concern about schools with no lunch program led the West Virginia State Nutrition Council to get the facts and develop a pamphlet telling how some schools have made milk available to pupils in lunchrooms, gymnasiums, classrooms, and at milk bars, and how schools use vending machines, chest-type coolers, and kitchen refrigerators to store and dispense milk.

The Council is distributing the pamphlet to PTA's, homemaking teachers in lower schools and colleges, industrial groups, and extension workers, in an effort to inform key persons of need for a State school milk program. One story in it is about primary school children who run a milk bar. Serving on a committee which changes weekly, children order, sell, wash bottles, and keep accounts. (See Materials.)

Help homemakers and other food managers responsible for the food of others learn to select food wisely and to prepare it in appealing nutrient-conserving ways. (Point 7)

Homemakers.—At the request of the Consumer Division of the General Federation of Women's Clubs (G.F.W.C.), the Minnesota State Nutrition Council prepared a topical bibliography for program use by G.F.W.C. clubs. The chairman of the Division, a member of the Council, intends to get copies of the bibliography to program chairmen in G.F.W.C.'s farflung clubs to which millions of women belong.

Materials are listed in the bibliography under subject matter topics to suggest ideas for programs. Topics are:

Eating your way to good health, Weight control, Marketing for food, How well fed are our children?, The school lunch program and the child, Present day food fads and fancies, Modern foods and present day food habits, Feeding the crowd, How does your community solve its nutrition problems?, and Nutrition education in your schools.

Institution managers.—The California State Interagency Food and Nutrition Committee in 1949 farsightedly established a Food Standards Subcommittee which did basic work on developing specifications for food purchases by the State (NCN, June 1952). In 1953 the Interagency Committee transferred the subcommittee to the State Purchases Standards Committee—a move to facilitate putting new specifications and procedures into operation. The Interagency Committee now acts in an advisory capacity to the subcommittee and has a liaison member on it.

The Rhode Island Nutrition Council, whose members are interested in various phases of food service, is concentrating this year on the nutritional content of meals served in child care institutions.

The Puerto Rico Nutrition Committee is trying to get public institutions to use more Puerto Rican foods.

Some talks directed toward improving food management practices that nutrition committee members have heard are:

What does the homemaker know about nutrition? (N. Y. State); TV shows for food shoppers (N. Y. State); Time and equipment used in meal preparations (N. Y. State); What it costs to cook with gas and electricity (N. Y. State); An easy way to figure cost per serving of food (N. Y. State); The art of feeding children (Ga.); Family meals and the therapeutic diet (Ill.).

Use mass media and group approaches to give better understanding of scientific nutrition, to combat food fads and nutrition misinformation, and to help overweights and underweights with their nutrition problems. (Point 8)

Radio.—West Virginia State Nutrition Council's members are trying to widen distribution and use of articles its members have prepared on obesity—3 for newspapers and 6 for either radio or newspapers.

Georgia Nutrition Council's 5 sections—Research, Community Nutrition, Food Service, Food Preservation, and Nutrition in Educational Institutions—are tape recording a series of interviews between an Extension Service information specialist and from 1 to 3 other persons selected for their knowledge of the subject. These programs are for use by local radio stations in the State.

March programs included: Nutritional status of Georgia children; The special school milk program; School lunch facilities in new school buildings; Preparation of salads and vegetables for quantity food service; Goals, membership and activities of the Georgia Nutrition Council; and Enrichment of corn products.

The Allegheny County (Pa.) Nutrition Council has given several series of educational programs over radio. One was a 13-week series on child nutrition. During another series for 26 weeks discussion centered about problems of overweight, such as how to reduce in the midst of a hungry family, eating out for the reducer, weight reduction and appetite depressants, and reducing on a budget. A third series, 13 weeks long, was on aging, titled "Improving Your Coming Years." Physicians, surgeons, psychiatrists, dietitians, nutritionists, and nurses participated in these programs.

Television.—Now the Allegheny County Council is in the midst of a television series over the local educational station. Guests on each program are from one of the nationality groups in the area. Food habits of the groups are used as a springboard for discussion of good food habits.

The Minnesota State Nutrition Council in cooperation with the Twin City Health Educators is putting on two 15-minute programs in a series of 13 telecasts. One program will be on uses of nonfat dry milk, the other on obesity. Each program represents the efforts of many.

Nutrition week.—Illinois 1954 nutrition week, sponsored by the Illinois State Nutrition Committee, was held November 7-13. Planning started early.

Each community was urged to develop the common State theme "Food First for Fitness" around local needs. A promotion kit containing suggestions for displays and programs for radio and television as well as other guiding materials was provided. However, the materials were intended only to start ideas rolling and to unify the State program.

Display suggestions covered: Choosing topic and type of display, how to make a display, sources of sound nutrition information, and names of stores and other places willing to exhibit nutrition week displays.

Suggestions for radio programs also included 30-second to 2-minute spot announcements. One announcement ended

with the simple statement—"According to surveys diets are low in vitamin A, vitamin C, and calcium. We need to drink more milk and eat more fruits and vegetables." Six- to eight-minute programs tape recorded by experts in the State were made available to radio stations.

A suggestion sheet for news stories to be distributed right after nutrition week ended projected the week's observance into the year ahead. Stories on accomplishments during Nutrition Week, plans for continuing nutrition work in schools, clubs, and elsewhere, and plans for nutrition week in 1955 were suggested to give the nutrition program continuity and to confirm nutrition week as an annual event.

Year-round program.—The Mississippi Nutrition Committee of the Mississippi Home Economics Association (MHEA) has voted a year-round educational program stressing "an adequate diet, low in calories if needed." Nutrition Committee members and the 82 county chairmen of MHEA's Coordinating Committee will make a State team. Each Nutrition Committee member will advise a group of counties, which she will be expected to visit. While there she will interpret State goals to county chairmen and other home economists, and encourage county meetings for the purpose of making county action plans.

Materials for county chairmen include a review of research on overweight-underweight (MHEA Research Committee), a bibliography of free materials for teaching the adequate diet low in calories (MHEA Nutrition Committee), and a bibliography of references on obesity (USPHS).

Weight-control program.—The Nashville-Davidson County (Tenn.) Nutrition Council started to explore need for a weight-control program in its area early in 1952. In 1953 a Committee was appointed to investigate weight-control programs elsewhere, get approval and cooperation of county health and medical agencies, review materials that might be appropriate for use, and locate meeting places for weight-control classes.

The Medical Society launched the program at an open Medical Forum attended by about 1,500 persons. The Nutrition Council informed the public about forum, classes, and programs in general via radio, films, television, posters, announcements at public meetings; community newspapers, and letters to key persons.

Also information on the causes and dangers of obesity and its prevention was spread. Several bookstores displayed books on obesity and nutrition in windows or inside the shop.

Teachers discussed the weight-control program with students and urged them to interest parents in coming to the Medical Forum. One thousand women in 48 home demonstration clubs attended meetings on "Weights and Diets" and planned followup. In home visits, PTA meetings, and well-baby clinics, nurses reached principals, teachers, and parents. County Health Departments devoted a staff meeting to discuss the problem of overweight and what staff members could do about it.

An orientation meeting for the 4 leaders and 10 assistant leaders of the weight-control classes was held in mid-December 1953. Leaders included two dietitians, a college professor in nutrition and chemistry, and a physician and professor at the medical college. In January 1954, classes started. The first night, all 82 students (79 women, 3 men) brought statements of certification signed by their physicians.

Tentative outlines for the five class meetings were approved by the Nashville Academy of Medicine. At the first meeting, "Why weight control," students listened to a 15-minute radio broadcast on obesity by a physician from the Nashville Academy of Medicine and saw a film on obesity made in collaboration with Dr. John Youmans, Vanderbilt University, Tennessee. After discussion, students received forms on which to record their food intakes for 3 days. Thus provision was made for personalized illustrations for the course.

At the second meeting in small groups, students checked their food intake, and calculated the calories eaten during 1 day of their record. They soon saw that most of their overeating was done between meals and before going to bed.

Topics for the other three meetings were: Spot slimming exercise, Facts or fads, and On your own. When classes were over, some students voted to continue meeting monthly and requested that a Council member be present.

The Nashville-Davidson County Nutrition Council plans to follow up the weight-control program with speakers at civic groups and to aid in organizing new classes if need is shown.

Practical information for lay persons has been gathered from talks at meetings on topics such as: Recent developments in nutrition of practical application to the lay person (Ind.); What people need to know about nutrition (Chicago); Dangers of food fads and fallacies and how we as a nutrition council can combat them (Ind.).

What Are Nutrition Committees Doing To Develop Alliance With Related Interests?

Be alert to opportunities to improve the nutritional value of the community's food supply. (Point 9)

The South Carolina State Nutrition Committee has unanimously endorsed legislative action for the enrichment of all rice sold in the State. Having informed themselves on the need for rice enrichment, its low cost, and the ease with which it can be done, its members are now passing their information on to appropriate committees of the legislature, women's clubs, and others.

The Puerto Rico Nutrition Committee in cooperation with agencies having agricultural programs has prepared a simple bulletin on the care of milk goats. That people needed to know more about feeding and housing goats became evident when 350 milk goats, a gift last year from the Heifer Project of America, were distributed to individual farmers and vocational agricultural schools. Goats are expected to help solve the milk problem for low-income rural families, especially those in the highlands.

The New Mexico Nutrition Committee vigorously sponsored their State bill for enrichment of white flour and bread which was passed in March.

These are some talks on the nutritional improvement of the food supply that nutrition committees have arranged:

What's new in food technology (Mass.); Effect of current processing methods on the nutritive value of foods (Ohio); Soil, climate, and nutritional value of food (Ohio); Nutritional improvement of white rice (Ga.); Rice enrichment legislation (S. C.); Iodine deficiency, a public health program (Ohio); Fluoridization problem in Ohio (Ohio); and Water problems in our State (Ill.).

Join forces with workers in education, health, agriculture, and the food industries to achieve an effective and integrated nutrition program. (Point 10)

Health education.—The Food and Nutrition Section of New York City's Welfare and Health Council decided to improve upon its successful 1953 work conference by widening representation from nutrition education in 1954. To achieve this the Council's Health Education Section was invited to help plan and sponsor the second work conference which was on "The Interdisciplinary Approach to Nutrition Education." Terminal evaluation of the conference by 65 participants indicated that a better understanding of work done in allied fields was reached and some progress was made in meeting mutual problems.

Public health.—The Allegheny County Nutrition Council is cooperating with the Schools of Public Health and Medicine of the University of Pittsburgh in a study of obesity and its association with chronic degenerative disease. It involves 2-year treatment and study of 400 persons who are 25 percent or more overweight, are between the ages of 40 and 60, and were referred by their own doctors. Nutritionists and dietitians of the Nutrition Council and Pittsburgh Dietetics Association have volunteered to confer with participants on their diets.

The Nutrition Council of Allegheny County was established September 1953 in the Health Division of the Health and Welfare Federation of Allegheny County to function as a planning group to improve community nutrition within the county. The Council provides a common meeting ground for direct service agencies, related professional groups, and interested citizens to study needs and to plan how services may be better performed and how gaps in services may be filled.

Major decisions are made by membership vote. The Council's work is guided by a Steering Committee of 10 interested in food and nutrition, public health, welfare, medicine, education, and human development. The Nutrition Council shares a 3-year grant from the Howard Heinz Endowment Fund with the Nutrition Clinic at the Medical Center of the University of Pittsburgh. The grant enables the Council and Clinic to have the shared services of a secretary and a nutritionist, and provides the Clinic with part-time doctor and nurse.

Welfare.—The Texas State Department of Public Welfare asked the Texas State Nutrition Council for help with problems of nutrition and feeding of children in group care facilities. In response, the Council appointed a special committee. To insure development of practical guides, operators of day care centers were included.

The committee started its job by studying existing standards used in licensing day care facilities for children from 2 to 6 years. It decided a pamphlet was needed that would add meaning to the statement, "Substantial meals suitable to the needs of growing children as recommended by 'Texas Food Standard' shall be provided."

The pamphlet, to be simply written, is to tell about: Food needs of children; planning, preparing, and serving meals to fit needs; and how mealtime situations can contribute to children's social and emotional growth. Major

emphasis is to be on helping welfare workers evaluate feeding of children in institutions. Guidance may be included on improving food in private foster homes and home meals of children attending day care centers, and on raising food standards in children's institutions above minimum.

Also a kit of source materials on nutrition and feeding of children in group care is to be assembled. Child welfare workers will be asked to review the material and determine whether they want a kit for each worker. Consideration is being given to preparing annotations on use of the various materials in the kit and to supplementing it with a more extensive bibliography.

The Council has a third project in mind for later—preparation of a State list of food, nutrition, and child development workers to whom child welfare workers might turn for assistance locally.

Civil Defense.—The California State Interagency Committee has reactivated its Civil Defense Committee. Its first task is to review four publications it prepared in 1952 for the State Office of Civil Defense to see if they apply to present day principles and plans.

The Chicago Nutrition Association is officially represented on the Welfare Council of Metropolitan Chicago and the Chicago Civil Defense Corps.

Louisiana State Nutrition Committee's Chairman is a member of the State Advisory Committee for Women in Civil Defense. The Nutrition Committee has prepared a pamphlet titled "Emergency Pantry Shelf and Menus" at the request of the State Civil Defense Agency. A subcommittee of hospital dietitians, school lunch managers, and public health nutritionists is working on a 7-day menu plan and a mass feeding manual.

Food industry.—The New Jersey Nutrition Council has persuaded one brewery to stop advertisements that are contrary to good nutrition and that make misleading claims about beer. They are now working with other breweries for the same purpose. A committee on fads and misinformation has been set up to screen advertising for false claims and if necessary to take action on them through the proper State and Federal agencies.

The groups with which nutrition committees have interests in common are reflected in some of the talks they have arranged:

Nutrition courses in colleges (S. C.); Progress in community health and nutrition programs (Ind.); Activities of Nutrition Committee of Georgia Mental Health Association (Ga.); PTA Health Program (Ind.); Civil defense is our business (Chicago); Emergency mass feeding school at Fort Benning (Ga.); Special school milk program (Ga., S. C.); Promotion of Indiana foods (Ind.).

HIGHLIGHTS OF IOWA'S WEIGHT CONTROL COLLOQUIUM

Iowa State College invited professional workers who deal with problems related to weight control to discuss its physiological, biochemical, psychological, and practical aspects, from January 18 to 20, 1955. The colloquium, held on the college campus, was sponsored by the college's Divisions of Home Economics and Agriculture. Researchers, teachers, therapists, and information specialists who take nutrition education messages to the public were there.

Papers from the colloquium will be available. In the meantime, it was felt that NCN readers who were not there would appreciate having some quotes that seem to have meaning for nutrition education programs. These have been taken from available summaries and abstracts prepared by the speakers.

Why weight control is important.—"Due to the increase in our total population and the increased proportion of older people, the magnitude of the obesity problem undoubtedly will increase." (James M. Hundley)

"In the treatment of obesity, the dominant practical fact has been the general failure of customary therapeutic methods to achieve any measure of lasting success . . ." (Jean Mayer)

"Therapy for best results should be directed toward weight reduction in the early stages of obesity. . . . Those who develop obesity as children appeared to be much more refractory to treatment than those who became obese as adults." (Charlotte M. Young)

How the problem of obesity grew.—". . . regulation of food intake was never designed to adapt to the highly mechanized sedentary conditions of 'modern' life . . . present day conditions in the United States, particularly in the cities, offer little inducement to walking. . . . Even among the young, highly competitive sports for the few are emphasized at the expense of individual sports which all could learn and continue to enjoy after school and college years are over. . . ." (Jean Mayer)

". . . automobile, laborsaving devices, small homes, shorter working hours, warmer homes, inactive and passive recreations, all accentuate the trend toward a decrease in energy output. . . . Attractive food displays, persuasive advertising, food columns, and editorials spur our appetites . . . plenty of money . . . food is easy to prepare . . . hospitality and entertainment [are] tied up with eating . . . [To] the strains and tensions of modern life without many physical outlets. . . . We tend to respond with greater food intake. . . ." (Charlotte M. Young)

Enlightenment.—". . . (a) That exercise requires relatively little caloric expenditure and therefore increased physical activity hardly changes the caloric balance, (b) that an increase in physical activity is always automatically followed by an increase in appetite and food intake and may, therefore, actually impair weight reduction. . . . are without foundation from experimental or clinical work." (Jean Mayer)

"Obesity (fatness) and overweight are not necessarily identical, and, except at the extremes, need not even be closely related. . . . obesity is better estimated by experienced observation or with skinfold calipers than with weight scales. . . . about half the total body fat is directly under the skin. . . ." (Ancel Keys)

Types of obese persons.—". . . group obese patients into three general types . . . the first type . . . has no apparent emotional problems . . . largely ignorance of relative food values and of the role of activity in energy balance. . . . easy to treat, and success is apt to be more lasting than in some of the other groups. The second group . . . eat to allay anxiety, and relieve . . . tensions . . . offers the greatest challenge. The third group appears to have deeper emotional problems. Generally, any attempt at weight reduction with these people before the basic emotional problems are treated is a waste of time. It may be harmful. Perhaps a psychiatrist could help segregate these people." (Charlotte M. Young)

"For children, as in adults, a weight within the customary range for age is evidence only that the calorie intake is not far from normal. It is not evidence that nutrition is good. . . . In infancy, rate of growth in length is a better single criterion of adequacy of nutrition. . . . A well-nourished child during preschool years increases his skeletal musculature at a greater rate than his general body growth. . . . poor muscle is reflected in poor posture. . . . As the child grows older, and continues to be moderately ill-nourished, though able to grow at a fairly normal rate and to maintain a weight that keeps his bones. . . . padded . . . his bones become osteoporotic, his posture poorer because of his poor musculature." (Genevieve Stearns)

Food habits.—"The increased tendency toward overweight by girls of 12 and older was not evident when the diet was liberal, although caloric intakes were relatively high. The observations of this study suggest that the inadequate diets of teen-age girls are often ineffective in keeping their waistlines slim . . ." (Ercel Eppright)

". . . selection of an adequate diet cannot be left to the older child. Presumably conditioned by habits in their own homes, 8 of 12 girls failed to take what we considered adequate protein when offered an amount equal to 17 percent of the intake [in calories]. They preferred carbohydrate." (Joseph A. Johnston)

". . . Many [Iowa women in a dietary study] . . . seemed to think that dieting and starving were synonymous. Some tried to get along on one or two meals a day. Others ate nothing but rolls and coffee. Some women said they were trying to eat foods that were not fattening, but actually ate foods that were extra rich in calories . . ." (Pearl Swanson)

". . . the diet used should be one which, with a few additions, can serve as the basic pattern of eating for the rest of the subject's life. . . . re-education of eating habits should not limit contacts with other people. . . .Better appetite control is achieved when the diet prescription is divided into three approximately equal meals. . . . weight loss is directly related to the calorie deficit imposed. All patients must accept a quantitative reduction in food, and may need to make qualitative changes in kind, amount, and distribution of food." (Margaret A. Ohlson et al.)

Timing education for weight control.—". . . After age 12, Iowa girls in the sample chosen revealed an increased tendency toward overweight. Hence, in the interest of good timing this might well be a crucial period in nutrition education for weight control . . ." (Ercel Eppright)

". . . tendency to relate the onset of overweight to an incident involving the reception of medical care . . . pregnancy, illness, or operation. . . . [is an] opportunity to observe the beginning of overweight and help the patient to prevent the accumulation of weight detrimental to his well-being in the years to come." (William D. Simmons)

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